

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO.

FILING DATE

APPLICANT(S)

CLAIMS

AS FILED AFTER 1ST AMENDMENT AFTER 2ND AMENDMENT

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TOTAL IND. 2
TOTAL DEP. 10
TOTAL CLAIMS 12

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TOTAL IND. 2
TOTAL DEP. 10
TOTAL CLAIMS 12